

Tennessee Board of Medical Examiners Development Committee

Monday, March 16, 2015

MINUTES

The development committee meeting of the Tennessee Board of Medical Examiners was called to order at 4:38 a.m. in the Iris Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243 by Dr. Zanolli, Board President.

Committee members present: Michael Zanolli, MD

Dennis Higdon, MD Neal Beckford, MD

Pat Eller, Consumer Member

Committee members absent: Subhi Ali, MD

Staff present: Andrea Huddleston, Chief Deputy General Counsel

Maegan Carr Martin, Executive Director, BME Rene Saunders, MD, Medical Consultant, BME

Angela Lawrence, BME Administrator

Dr. Zanolli stated the purpose of the Development Committee: to have further discussion and to make recommendations concerning topics in the form of a motion to the full Board. The Development Committee does not make board decisions; however, the Committee does discuss in an open meeting and on record, certain topics that require more deliberation in order to filter down important aspects related to Board function.

I. POSSIBLE FEE INCREASE

In January, the Board of Medical Examiners was presented with information regarding the 2015 budget. That document illustrated new fiscal responsibilities the Board has now that it has not had in the past, such as support of the Controlled Substance Monitoring Database (CSMD). These expenditures have outpaced revenue and the Board closed 2014 with a deficit.

Ms. Lisa Tittle was present to speak more specifically to the Board's finances. She specified that the Board does have reserves; however, it is not authorized to dip into reserves to compensate for annual expenditures. If annual expenditures exceed annual income, the Board pulls those funds

from the cumulative carryover. If this happens for two years in a row, a review before the Government Operations Committee is triggered. That review subjects the Board to sunset review and requires that the Board account to the Committee why it is not meeting its statutory requirement to maintain its self-sufficiency. Ms. Tittle's office has not finalized 2015 projections; however, that task should be completed by the end of this month.

Ms. Tittle stated the last time the Board increased their fees was over ten (10) years ago. The current application fee is \$400.00 and the renewal fee is \$225.00. If the Board increases its renewal fee to \$240.00, it will increase the Board's renewal revenue \$150,000.00 a year. If the Board increases its renewal fee to \$250.00, it will increase renewal revenue by \$250,000.00.

Dr. Zanolli clarified that should the Committee choose to make a recommendation to the Board on the fee increase, it will require a rule change by the whole board. Ms. Huddleston stated that the Board could schedule a rulemaking hearing by the July meeting.

Dr. Beckford made a motion to recommend a fee increase on renewals. Dr. Higdon seconded the motion. The Board began a discussion regarding the appropriate amount by which to increase the fees. After some discussion, Ms. Eller made a motion to recommend increasing the renewal fee to \$275.00 and initial application fee to \$500.00. Dr. Higdon seconded the motion. The motion passed unanimously.

Dr. Beckford stated that it would be interesting to see where Tennessee falls with respect to licensure fees. He suggested that administrative staff work to compile data regarding licensure fees across the country. If a proposed licensure fee increase results in a surplus, it might be good for the Board to say what it would do with the money.

The Committee was given a document summarizing the various health related boards' approaches to licensure verification fees. Ms. Martin stated that despite a very high volume of licensure verification requests, the Board does not currently charge a verification fee. After discussion by the Committee, Ms. Eller made a motion to recommend charging \$25.00 for the processing of licensure verifications by the Administrative Staff. Dr. Beckford seconded the motion. The motion passed unanimously.

Ms. Tittle requested to be on the agenda for the May meeting. By that time, the 2015 projections should be prepared and Ms. Tittle can build in the fees suggested by the Committee. That will give the Board the opportunity to review whether these fee increases are appropriate.

II. Examine prescribing education in graduate medical education

Ms. Martin stated that the issue of prescribing education in graduate medical education came up during the last meeting. At that time, the recommendation was for the Development Committee to consider examining what type of pharmacology or prescribing education was taking place within the programs.

Dr. Beckford spoke in support of contacting the various GME programs in the state to let them know this is something the Board feels residents could benefit from and should be engaged in as part of their training. The Board should also consider how it can assist in the development of an appropriate prescribing program. He suggested that the Tennessee Medical Association (TMA) might be an appropriate resource.

Dr. Saunders stated that we have jurisdiction over the residents as they have a training license with the Board.

Dr. Beckford reiterated his belief that the interns and residents that are in training and writing prescriptions for controlled substances and need to be aware of prescribing issues. The health, safety and welfare of the citizens of Tennessee will be best served if residents and interns are exposed to best prescribing practices during their training.

Ms. Huddleston stated that requiring residents, interns and fellows to have prescribing instruction would definitely require a rule change.

Dr. Zanolli expressed his support for this item moving this forward.

Ms. Martin requested the Committee table this item until the next meeting so we have time to look at the rules and statutes to see what statutory authority the Board has and what rules would need to be changed. The Board certainly has the ability to reemphasize with the programs how important it is that these residents and interns are receiving the proper prescribing education. This type of outreach should take some time to develop.

Dr. Higdon made a motion to table the discussion on prescribing education in graduate medical education until we receive additional information. He requested that this item be placed back on the Development Committee agenda. Dr. Beckford seconded the motion. The motion passed unanimously.

III. Consideration of revised lased license policy

The committee reviewed the current policy and discussed the fee that should be assessed to those who work on a lapsed license.

Dr. Beckford stated it would be very helpful if the Department had a system that alerted physicians who were about to expire. Such a system would allow the Board to rest assured that it has taken all reasonable steps to assist its licensee.

Ms. Martin stated that the administrative office is exploring what options the new system may provide us with respect to notifying licensees of their licensure status. In the end, it's the responsibility of the practitioner to maintain their license.

Dr. Zanolli stated that these violations are reported to the National Practitioner Databank. Ms. Huddleston clarified that the reportability of a particular issue is a matter of federal law. The National Practitioner Databank has advised the Office of General Counsel that the unauthorized practice of medicine is related to the delivery of patient care and thus reportable.

Ms. Huddleston also pointed out that there is some discrepancy between the statute and the policy regarding the number of days a physician has to renew. The statute states that a physician has sixty (60) days from the date of the expiration of his license to renew with payment of a late fee. The existing policy violates the statute.

The recommendations made by this Committee will be considered by the full Board during its meeting tomorrow.

There being no other business, the meeting was adjourned at 6:32.